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FEC MAIL CENTER

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

California Association of Physician Groups (CAPG) Physicians Independent Expenditure Committee

(CAPG Physicians IEC)

ADDRESS (number and street)

915 Wilshire Blvd., Suite 1620



(Check if address
is changed)

Los Angeles

CA

90017

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)



(Check if address
is changed)

wbarcello@capg.org

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

http://www.capg.org

2. DATE

01 / 19 / 2011

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Donald H. Crane

Signature of Treasurer

Donald H. Crane

Date

01 / 19 / 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

11030551265

Candidate Committee:

- Name of Candidate _____

Name of Candidate _____

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

California Association of Physician Groups (CAPG)

Mailing Address

915 Wilshire Blvd., Suite 1620

Los Angeles

CITY

CA

STATE

90017

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.**

Full Name

Cassandra Perkins

Mailing Address

915 Wilshire Blvd., Suite 1620

Los Angeles

CITY

CA

STATE

90017

ZIP CODE

Title or Position

Director of Administration

Telephone number

213

239

5040

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name
of Treasurer

Donald H. Crane

Mailing Address

915 Wilshire Blvd., Suite 1620

Los Angeles

CITY

CA

STATE

90017

ZIP CODE

Title or Position

President & CEO, CAPG

Telephone number

213

239

5042

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Merrill Lynch

Mailing Address

Merrill Lynch / The Mariconda Group

24422 Avenida de la Carlota, Suite 400

Laguna Hills

CA

92653

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY


STATE

ZIP CODE

11030551268

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> No Postmark	
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Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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PREPARER

(3/2005)

1/25/11

DATE PREPARED

11030551269